

COMPLIANCE PERMIT - RESIDENTIAL

Town of Islip Building Division 1 Manitton Court, Islip, NY 11751 www.islipny.gov

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Property Owner*:

Owners Address:

Business Address:

(if different from above) House No / Street

(if different from property owner) Business Name

Expeditor / Applicant:

STRUCTURES 4 YEARS & OLDER ONLY RESIDENTIAL PERMIT

COMPLETE THIS APPLICATION AND SUBMIT TO THE PERMITS DEPARTMENT ALONG WITH ALL REQUIRED DOCUMENTATION LISTED BELOW

This Permit EXPIRES 1 year from date of issuance. NO RENEWALS ALLOWED.

Full Name

Subject Addre	Bldg/House #	Street		S	uite
City			State	Zip	-

FOR	OFFICE USE	CONLY

PLACE STICKER HERE

			•	
Zoning Letter for Applicant:	☐ Yes ☐ No	As-built Survey Required:	□У	es 🗆 No
Zoning Approva	al Date:		By:	
Plans Examiner	Approval Dat	te: N/A	By:	N/A
Approved to Iss	ue Date:		By:	
Issued Date:			By:	
Permit Expiration	on Date:			
Special Condition	ons of Permit:			
Filing Fee: \$	Į,	Receipt #:		
Filing Fee: \$ _ Permit Fee:\$		Receipt #:		
Filing Fee: \$ _ Permit Fee: \$ _ Total Fee: \$ _	F	Receipt #: Receipt #: C Issued:		
Permit Fee:\$	F	Receipt #:		

State

Phone

Zip

Email

City

A Certificate of Compliance Permit is required for structures built over 4 years ago:

1. without the benefit of a permit

House No / Street

- 2. when a permit exceeds its maximum renewals, or
- 3. for accessory apartments built without a permit, regardless of age.

PLEASE COMPLETE ALL SECTIONS BELOW - BE AS DETAILED AS POSSIBLE

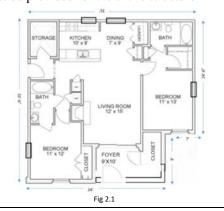
Size	Floor	Un-permitted Improvement – List each improvement <u>separately</u>	Year Built
dimensions or s.f.	1^{st} , 2^{nd} ,	i.e. Main Dwelling, Addition, Interior Alteration (describe alteration. i.e. garage to bedroom), Pool	
of improvement	basement	(above ground or in-ground), Solar Panels, Plumbing, Accessory Structure (i.e. Shed, Deck, Pool	
<u>only</u>		House, Detached Garage), Stove/Fireplace, Accessory Apartment, 2 Family – Family Use, Cellar	
		Entrance/Alteration/Egress Windows, Handicapped Ramps, Skylights over 15" wide, Retaining Walls, Ponds, Garage Conversion,	

^{*} If property was purchased within the last 6 months, a copy of the deed, or closing papers indicating the deed was sent to Suffolk County to be recorded is required. If property owner is a corporation or LLC, legal paperwork stating the person signing the application is an authorized signator for the Corporation or LLC is required.

PLACE STICKER HERE

REQUIRED DOCUMENTATION:

- 1. **Survey:** All surveys must have been prepared by a licensed surveyor, be scalable, and must accurately depict all existing structures on the property. Structures cannot be hand drawn on the survey.
- **2. Application Fee:** Please visit http://islipny.gov/departments/planning-and-development/building-division-permits-section for our current fee schedule. The final fee will be determined based on actual site conditions from the Towns inspections.
- 3. Floor Plans: If this application is for an interior alteration or addition, floor plans must be provided for the entire structure including cellar/basement. Floor plans may be hand-drawn, but requirements below must be met (see Fig 2.1 Plan Example):
 - Indicate name of various spaces (e.g. kitchen, bath, dining, etc.)
 - Draw windows and doors
 - Give interior & exterior dimensions
 - Draw stairs, ramps, and/or elevators
 Note: If it is determined that a New York State Variance is required, professionally drawn plans may be required.
- **4. Other:** I understand that this application may require review/approval from different departments and/or outside agencies.



I understand that the Town is relying on the information provided herein, any inaccuracy may cause delays and/or additional fees. I swear this application is a true and complete statement of all work on the desired premises. This permit issuance expressly implies approval by the landowner of inspections required of the premises. By submitting this application, I acknowledge and agree that a modification or addition may be made to the Certificate of Occupancy/Compliance. No further notice of any resultant modification or addition shall be required.

PROPERTY OWNER: PRINT NAME	SWORN TO ME THIS DAY OF, 20	NOTARY STAMP
SIGNATURE NOT. EXPEDITOR/DESIGN PROFESSIONAL:	SWORN TO ME THIS	NOTARY STAMP
PRINT NAME	DAY OF, 20	

FOR OFFICE USE ONLY:				
Description	Square Footage	Fee		
		\$		
		\$		
		\$		
		\$		
		\$		
		\$		
		\$		
		\$		
		\$		
		\$		
		\$		
		\$		
	TOTAL FEE:	\$		